## In the United States Patent and Trademark Office

	Mailed 12-27-01
Box Patent Application	
Assistant Commissioner for Patents	
Washington, District of Columbia 20231 .	
Sir:	
Please file the following enclosed patent application papers:	•
Applicant #1, Name: HOWARD KAPPLE	
Applicant #2, Name:	
Title: PRECISION AID.	
☐ Specification, Claims, and Abstract: Nr. of Sheets	
☐ Declaration: Date Signed:	
☐ Drawing(s): Nr. of Sheets Enc.: Formal: Informal: _4	Annual Constitution of the
☑ Small Entity Declaration of Inventor(s) ☐ SED of No.	on-Inventor / Assignee / Licensee
☐ Assignment enclosed with cover sheet and recordal fee; please rec	ord and return.
☐ Check for \$ 370 ≥ for: B sic Utility Ap	ppn. F-e.
s for filing fee (not more than three	e independent claims and twenty total claims are presented).
additional if Assignment is enclosed	osed for recordal.
☑ Information Disclosure Statement, Form PTO-1449, and listed refe	erences.
☐ Disclosure Document Program reference letter.	
☐ Pursuant to 35 U.S.C. §119(e)(i), applicant(s) claim priority of Pr	ovisional Patent Application Ser. Nr,
filed	
Return Receipt Postcard Addressed to Applicant #1.	
Request Under MPEP § 707.07(j): The undersigned, a pro s patentable subject matter disclosed in this application, but feels t Examiner draft one or more allowable claims for applicant.	
Very respectfully,	
Applicant    1 Signature	Applicant #2 Signature
1927 Fairmeadows Dr. Address (Send Correspondence Here)	Address
Bettendorf, Iowa.52722	
Express Mail Label #	; Date of Deposit 199

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Box Patent Application Assistant Commissioner for Patents Washington, District of Columbia 20231

First-Named Applicant

Address

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Title of Inve	ntion: " ent Enclosed (From Calculation Br	elow): \$	<u> 3</u>	70 % CK#3033	☑ Check	☐ Money Order
Sir:			- nc	cit in go ag		
Enclosed is	the following small entity filing for	ee for the above p	patent application:			
	Fee Description			·	Ī	ee (\$)
214	Provisional Pat. Appn. Filing Fee	)				
201	Basic Utility Appn. Filing Fee		•			370,00
206	Basic Design Appn. Filing Fee					
	Subtotal (1)					
203	Total Claims:	- 20 =	; X	(fee for each claim	over 20) =	
202	Tot. Indep. Claims	- 3 =	; X	(fee for each indep	o. claim over 3) =	
	Subtotal (2)					
Total Pay	ment Enclosed [Sum of Subt	otals (1) and (2	2)]			370°
Howa Print Name	First-Named Applicant  ard Kapple of First-Named Applicant			-		
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Form 10-1A: Fee Transmittal

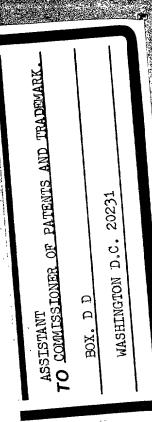
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